DR 8009 (03/27/19)
COLORADO DEPARTMENT OF REVENUE
Liquor Enforcement Division
1697 Cole Blvd, Suite 200
Lakewood, CO 80401

Change Of Mailing Address/Name Notification

- For physical change of location, submit DR 8442
- For Corporate/Trade Name changes, submit DR 8442

Name of Licensee								
Trade Name (doing business	as)							
License Number				License Type				
Phone Number				Email Address				
Address Change								
New Mailing Address				City				
State		Zip			County			
Name Change (Person	nal) 🗌							
Previous Name				New Name				
Reason for Name Change (c	heck one)				l .			
☐ Marriage	Date	Submit a convert the local decumentation reflecting the name shares						
Divorce	Date	Acceptable	Submit a copy of the legal documentation reflecting the name change. Acceptable forms of documentation include: marriage license, divorce decree, court order, immigration records, or passport.					
Court Order	Date	court orde	podit order, immigration records, or passport.					
I hereby attest that the above	information provide	d is true.						
Last Name (please print)				First Name (please print)				
Signature							Date	